

ISSUE FEE TRANSMITTAL

U.S. Department of Commerce
Patent and Trademark Office

This form is provided in lieu of a formal transmittal and should be used for transmitting the Issue Fee. Sections 1A through 4 must be completed as appropriate.

INVENTOR'S ADDRESS CHANGE / SC/SERIAL NO.

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

City, State and Zip Code

City, State and Zip Code

City, State and Zip Code

City, State and Zip Code

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MAILING INSTRUCTIONS

All further correspondence including the Issue Fee Receipt the Patent, and advanced orders will be mailed to the address entered in section 1 on PTOL-85c, unless you direct otherwise by specifying the appropriate name and address in 1A below. (Note: See box 5 below for correspondence concerning maintenance fee payments.)

2A. The COMMISSIONER OF PATENTS AND TRADE-MARKS is requested to apply the Issue Fee to the application identified below.

(Signature of Party in Interest of record)

(Date)

Note: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
05/819,141	01/15/86	007	FEELMAN, S	125 10/26/86

First Named Applicant

BORRILE

TITLE OF METHOD OF TREATING ALZHEIMER'S DISEASE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
U 5491	514-215.000	727	UTILITY	YES	4280.00	01/30/87

1A. Further correspondence to be mailed to the following:

JOHN RICHARDS

c/o LADAS & PARRY

26 WEST 61st STREET

NEW YORK, N.Y. 10023

Reg. No. 31053 (212) 708-1915

2B. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 LADAS & PARRY
26 West 61st Street
2 New York, N.Y. 10023
3 (212) 708-1800

DO NOT USE THIS SPACE

ASSIGNMENT DATA (print or type) ATTENTION IS DIRECTED TO 37 C.F.R. 1.334

- (1) ☒ This application is NOT assigned.
(2) ☐ Assignment previously submitted to the Patent and Trademark Office.
(3) ☐ Assignment submitted herewith.

For Printing On The Patent: (Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data below is only appropriate when an assignment has been previously submitted to the PTO or is submitted herewith. Completion of this form is NOT a substitute for filing of an assignment as required by 37 C.F.R. 1.334).

(1) NAME OF ASSIGNEE:

(2) ADDRESS: (City & State or Country)

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION:

4. The following fees are enclosed: ☒ Issue Fee
☐ Advanced order ☐ Assignment recording
Any additional fees should be charged to:
deposit acct. no. 12-0425
(PTOL-85c or additional copy of PTOL-85b must be enclosed)

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Number of advanced order copies requested

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5. All correspondence relating to maintenance fees will be addressed to the correspondence address unless a separate "Fee Address" is provided to the Patent and Trademark Office (37 CFR 1.363). A "Fee Address" may be submitted by the owner of record with the payment of the issue fee or thereafter by using form PTO-1537.

TRANSMIT THIS FORM WITH FEE

ISSUE FEE TRANSMITTAL

U.S. Department of Commerce
Patent and Trademark Office

LESTER HOROWITZ
c/o LADAS & PARRY
26 WEST 61ST STREET
NEW YORK, N.Y. 10023

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(Signature of party in interest of record)

(Date)

Jan 15 87

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SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
05 015-111	01-15-86	007	FRIEDMAN, S.	125 10-26-86

First named applicant: LADAS & PARRY

TITLE OF METHOD OF TREATING MENINGEAL DISEASE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
U 56281	514-213.000	12	UTILITY	NO	\$200.00	01-20-87

Further correspondence to be mailed to the following:

JOHN RICHARDS
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26 WEST 61ST STREET
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Reg. No. 31053 (212) 708-1915

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